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AFGHANISTAN

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Public Information Office: +93 (0)70-234-236 x4037

E-mail: kabulusaidinformation@usaid.gov

<http://afghanistan.usaid.gov>

FACT SHEET

Basic Support for Institutionalizing Child Survival-III (BASICS-III)

OVERVIEW

Despite the enormous progress already made in rebuilding Afghanistan's health system since 2002, an urgent need persists to improve healthcare for children. In district and provincial hospitals, children younger than age five made up 27 percent of hospital admissions and nearly 60 percent of all hospital deaths.

The protocol of the Integrated Management of Childhood Illnesses (IMCI), an integrated treatment approach that focuses on the well-being of the whole child as opposed to disease-specific treatments, needed to include global best practices in child health, zinc for treatment of diarrhea (a leading cause of childhood death), provisions for newborn care, and reinforcement of nutrition monitoring and support. At the local level, Community IMCI was not comprehensively addressed by community health workers, and the quality of community case management was lacking. In coordination with the Ministry of Public Health (MoPH) the BASICS project addresses these deficiencies at the policy, community, health facility, and hospital levels.

CURRENT ACTIVITIES

- Improve child healthcare at all levels by introducing an integrated child survival package, including growth monitoring and promotion, IMCI, newborn care and pediatric hospital improvement measures
- Strengthen cross-cutting health system components, such as information, education and communication and behavior change communication (IEC/BCC) materials to improve child healthcare
- Develop newborn and child health messages to be used at the national level by MoPH, families, and communities
- Introduce the Expanded Program on Immunization (EPI) to the five initial implementation site districts to improve immunization coverage

ACCOMPLISHMENTS

- Updated and received MoPH endorsement of the following child health policies: the Child and Adolescent Health Policy and Strategy, Public Nutrition Policy, Zinc and Diarrhea Management Policy, and the Infant and Young Child Feeding Strategy
- Designed the Integrated Child Survival Package to include interventions in nutrition, newborn care, community case management, and behavior change communication messages in 28 districts
- Refined the facility-based IMCI protocol and training curriculum to include newborn care, ear infections, and use of oral rehydration salts and zinc as treatment for diarrhea
- Conducted a participatory quality assessment of pediatric care in six provincial hospitals and five district hospitals in six provinces, that defined four priority quality improvement interventions: 1) emergency triage and treatment for children, 2) care of sick newborns, 3) infection control and hygiene, and 4) supportive supervision and monitoring
- Drafted a BCC strategic plan for child survival and reviewed community-based, health center- and hospital-based Health Management Information Systems indicators for child and newborn health
- Supported establishment of the MoPH National Maternal and Child Survival Committee